

**MINUTES OF THE  
SENATE COMMITTEE ON COMMERCE AND LABOR**

**Seventy-fourth Session  
April 9, 2007**

The Senate Committee on Commerce and Labor was called to order by Chair Randolph J. Townsend at 8:06 a.m. on Monday, April 9, 2007, in Room 2135 of the Legislative Building, Carson City, Nevada. The meeting was videoconferenced to the Grant Sawyer State Office Building, Room 4412E, 555 East Washington Avenue, Las Vegas, Nevada. [Exhibit A](#) is the Agenda. [Exhibit B](#) is the Attendance Roster. All exhibits are available and on file in the Research Library of the Legislative Counsel Bureau.

**COMMITTEE MEMBERS PRESENT:**

Senator Randolph J. Townsend, Chair  
Senator Warren B. Hardy II, Vice Chair  
Senator Joseph J. Heck  
Senator Michael A. Schneider  
Senator Maggie Carlton

**STAFF MEMBERS PRESENT:**

Kelly S. Gregory, Committee Policy Analyst  
Lynn Hendricks, Committee Secretary  
Wil Keane, Committee Counsel  
Scott Young, Committee Policy Analyst  
Gloria Gaillard-Powell, Committee Secretary

**OTHERS PRESENT:**

Marie A. Wakefield, President, American Counseling Association; American Health Association; National Board of Certified Counselors  
Beth Powell, Director Public Policy and Professional Issues, American Mental Health Counselors Association  
Louise Sutherland, National Board for Certified Counselors  
Patricia A. Markos, Chair, Department of Counselor Education, University of Nevada, Las Vegas  
Erik Schoen, Professional Counselor  
Shaun Larrabee, Licensed Professional Counselor  
Terry Lynn Tuttle, Licensed Professional Counselor

Senate Committee on Commerce and Labor  
April 9, 2007  
Page 2

Jenni Johnson

Frank Parenti, Executive Director, Nevada Alliance for Addiction Disorders,  
Advocacy, Prevention and Treatment

Larry Ashley, Department of Counseling, University of Nevada, Las Vegas

Wendy Hoskins, University of Nevada, Las Vegas

Helen A. Foley, Nevada Association of Marriage and Family Therapists

Gerald Weeks, Chair, Department of Marriage and Family Therapy, University of  
Nevada, Las Vegas

Stephen Fife, Assistant Professor, Department of Marriage and Family Therapy,  
University of Nevada, Las Vegas

Capa Casale, President, Nevada Association for Marriage and Family Therapy

K. Neena Laxalt, Board of Examiners for Marriage and Family Therapists

Dr. Don Huggins

Richard Vande Voort, M.A., President, Board of Examiners for Marriage and  
Family Therapists

Katherine Hertlein, University of Nevada, Las Vegas

Gary Waters

Shelley Sendak

Amanda Hughes, Student, University of Nevada, Las Vegas

Rena M. Nora, M.D., Board of Examiners for Alcohol, Drug and Gambling  
Counselors

Kevin Quint, Board of Examiners for Alcohol, Drug and Gambling Counselors

Margo Hill, Licensed Marriage and Family Therapist

Judy K. Phoenix, Ph.D. Nevada State Psychological Association

Scott E. Bice, Commissioner, Division of Mortgage Lending, Department of  
Business and Industry

Mark Brewer, Certified Mortgage Planning Specialist

Jack Kim, Nevada Association of Health Plans

Erin Summers, Division of Insurance, Department of Business and Industry

Sylvia Smith, Nevada Land Title Association

CHAIR TOWNSEND:

I will open the hearing on Senate Bill (S.B.) 543.

**SENATE BILL 543**: Establishes the practice of behavioral health counseling.  
(BDR 54-308)

SENATOR JOSEPH J. HECK (Clark County Senatorial District No. 5):

Senate Bill 543 is an effort to try to address the significant lack of mental health resources within the State. It comes as no surprise to this Committee or many in this legislative body that we face a crisis in mental health services in this State. Nowhere is that better underscored than at the emergency rooms in southern Nevada where overcrowding due to mental health patients is a significant problem. Two years ago the county manager declared a state of emergency based on the overcrowding. The lack of mental health care has significance for those who are in the emergency departments as mental health patients because they do not receive the required care they need until they are transferred to a mental health facility. It has an impact on all other patients who come to hospital emergency departments because it delays the amount of time in which they can be seen.

In southern Nevada we average around a four-hour turnover on an emergency room bed. Every day that a mental health patient is occupying that bed, six other patients are displaced. Even with the new mental health hospital in southern Nevada, we are still inadequate with the number of publicly funded mental health beds; way below the national average of 33 beds for each 100,000 people. Part of the answer to this problem is improved access to community services to help those individuals with serious mental illness stay out of the hospital.

The primary goal of S.B. 543 is to introduce the credential of Licensed Professional Counselors (LPCs) to Nevada to increase access. It may be surprising to many that we are only one of two states in the country that do not recognize this credential. This is a recommendation of the Legislative Committee on Health Care Subcommittee to Study Services for the Treatment and Prevention of Substance Abuse which met during the interim.

A secondary goal is to try to increase the synergy among master's level mental health professionals in providing comprehensive services for those suffering from co-occurring disorders. Upwards of 50 percent of those with serious mental illness have substance-abuse problems compared to 15 percent of the general population.

SENATOR HECK:

Through the chair's experience on the President's Mental Health Commission and his firsthand knowledge of this fact, is one of the reasons why he was the

primary sponsor and introduced a bill forming the advisory committee on co-occurring disorders into the Health Care Committee this Session. The State and this body recognized this issue last session when we passed a bill to merge the Bureau of Alcohol and Drug Abuse with the Division of Mental Health and Developmental Services. Senate Bill 543 is largely based on the current marriage and family therapists chapter of the *Nevada Revised Statutes* (NRS). It creates a joint board for LPCs, marriage and family therapists (MFTs) and those licensed under the drug and alcohol abuse chapter which includes problem gambling counselors and detoxification technicians. The board would be composed of three individuals from each discipline and two public members. The bill describes broad topic areas of education to allow flexibility in meeting the specific needs of each discipline. It specifies a supervised experience necessary for licensure and it maintains each discipline's title and licensure.

I am sure you have all received a multitude of e-mails as I have over the past week expressing concern over what has been termed as a super board. I do not call it a super board; I think that is rather inflammatory. It is really a joint board. For those that are concerned, I believe the concern comes out of fear of the unknown and perhaps the ability to try to protect turf. It may interest the Committee to know there are 31 states with joint boards around the country. The question has been posed, why this joint board does not include psychologists and licensed clinical social workers. The answer is because the board is concentrating on those with master's level degrees, it does not include licensed clinical social workers. The bill did start out including licensed clinical social workers and as we tried to draft the bill, I recognized the reason why only 16 of the 31 joint boards around the country include social workers. As I called around to the states where they were not included, I found they were having the same difficulties as I had when trying to come up with this legislation. There are other types or disciplines within social work other than those that practice mental health. In Nevada, we have independent social work, the associated social work and the social worker. Those individuals are not necessarily involved in mental health services and therefore it becomes very difficult to try to include them in a bill and chapter that would concentrate on mental health. I also would point out that of the 50 states that license marriage and family therapists (MFTs) only 13 states have a separate MFT board.

SENATOR HECK:

Another part of the e-mail was the board would be overwhelmed in each discipline with only three representatives from each area. There are

692 licensed MFTs in the State and in 2006, they only issued 22 additional licenses. From a disciplinary standpoint, they had 2 discipline cases in 2005 and 10 in 2006. On the drug and alcohol abuse chapter, there are 1292 active licensees and over the last 3 years they on average have had about 28 disciplinary actions. Another concern is it would lessen the professional identity. I am not sure why that would be the case, because each entity still retains their title and their own individual licensure.

There were concerns about jeopardized accreditation or training problems but the bill was specifically designed to meet the requirements of the American Association of Family Therapy as well as the National Board for Certified Counselors. There were also concerns that it would not safeguard the public. Basic educational and supervisory standards would now be uniform. I am sure there are many here this morning who will offer testimony on why a joint board is a bad idea. My primary goal of this bill is to increase access to mental health services by increasing the numbers of trained professionals who can offer services. The University of Nevada, Las Vegas has a degree in community counseling, yet those graduates would not be eligible for any type of licensure in the State. There is no reason for them after completing the training to stay here and provide mental health services. I briefly explained why the joint board is beneficial, but whether LPCs are recognized through a joint board or through a new board on its own, I leave it to the discretion of the Committee. The bill is written as a joint board because it will be easier to amend out provisions than to amend in.

SENATOR HARDY:

How many states have the composite board?

SENATOR HECK:

There are 31 states with composite boards made up of varying different professionals. Nevada and California are the only states that do not recognize this particular credential.

SENATOR HARDY:

I have also been getting the e-mails. Are there concerns being brought up by these e-mails?

SENATOR HECK:

There is concern because there is the fear of the unknown, and fear of a loss of autonomy. There would be entities that are sitting on current boards that would no longer be part of a board. I look at this as if you are taking two existing boards and putting them together and adding another credential. There will be more than enough work for all staff. I see it as a merging of the two boards and not the taking over of one board or recreating an entirely new entity.

SENATOR CARLTON:

Are the 48 other states a part of an existing board?

SENATOR HECK:

Of the 48 states that have LPCs, they are part of a joint board in all but 12. There are 12 states of the 48 that have a separate board.

SENATOR CARLTON:

Do you know what boards they are under in those other states?

SENATOR HECK:

Arizona has a composite board of all licensed clinical social workers, MFTs, alcohol and drug abuse and professional counselors. I can give you a list.

SENATOR CARLTON:

If they would be a subset of another board, what would be your opinion?

SENATOR HECK:

In my opinion, you could not put them in the alcohol and drug abuse counselor board and leave that as the board of examiners for drug and alcohol abuse unless we added drug and alcohol abuse and professional counselors. If we were just going to put it under the MFT chapter, it would have to be the new Board of Marriage and Family Therapy and Professional Counselors. My primary goal is to make sure we have the credentials this Session. Where it fits, whether it is under licensed alcohol and drug abuse counselor board, MFT board or together as all one board, I leave that to the discretion of the Committee.

SENATOR CARLTON:

I have been talking with Assemblywoman Sheila Leslie about her bill, Assembly Bill (A.B.) 424.

**ASSEMBLY BILL 424**: Revises provisions relating to the licensure of counselors.  
(BDR 54-1294)

SENATOR HECK:

Assembly Bill 424 examines including professional counselors under the regulation of the Board of Examiners for Marriage and Family Therapists. I think there is an important nexus between the drug and alcohol abuse counselors and the entire counseling professional and therapy professions, especially with the growing number of co-occurring disorders.

MARIE A. WAKEFIELD (President, American Counseling Association; American Mental Health Association; National Board for Certified Counselors):

Our three organizations strongly endorse S.B. 543 and urge the Committee to approve this bill. Counseling is a well-established, mature profession. The counselors are licensed as master's level behavior health service professionals in 48 states and the District of Columbia meeting education, training and examination requirements on par with those of the other two widely organized mental health professions of clinical social work and marriage and family therapy. These are both licensed in our State. There are more than 100,000 LPCs across the country. More than half of the nation's licensed MFTs are concentrated in the state of California. The profession of counseling is distinct from social work and marriage and family therapy. The three professions differ in their historical emphasis and orientation. Marriage and family therapists are trained to approach their clients' problems through the lens of their family relationships. Counselors' training is centered on assisting the client with counseling interventions. Graduate degrees in counseling may focus on providing services in a particular setting.

As the Committee knows, Nevadans need increased access to qualified mental health professionals and the State currently suffers from a shortage of such providers. This has been shown through several different studies. Nevada's overall suicide rate is tied for second highest in the nation and has almost doubled the national average. A survey done in 2003 in southern Nevada found one in five respondents said anxiety, stress or depression have been a major issue in their household and one in three indicated alcohol or drug abuse occurred in their household. Nevada's relatively poor mental health status can be partially attributed to not having an established licensure of professional counselors. Nationwide there is one professional counselor, clinical social worker or MFT for every 956 U.S. residents. In Nevada, without counselor

licensure, the ratio of state residents to licensed clinical social workers or marriage and family therapists is more than 1,500 to 1. Along with their colleagues in the field of psychiatry and physiology, master's level mental health professionals form a key part of the mental health system. By joining the rest of the nation in establishing licensure of professional counselors, Nevada can expand its pool of qualified mental health professionals available to help meet residence treatment needs.

The legislation before this Committee sets strong appropriate standards and requirements for becoming licensed as professional counselors. The standards and requirements will help protect the public from inappropriate and injurious treatment. In 31 of the 49 jurisdictions in which counselors are licensed, a composite board oversees both the practice of counseling and one or more of the related professions of marriage and family therapy and clinical social work. The structure has worked well and would not be so widely used if it did not. Contrary to the claims made by some regarding this legislation, the professions can coexist and cooperate. State licensure of professional counselors as behavioral health care providers through a joint board including one of the other master's level mental health professions is the norm, not the exception. Licensure of professional counselors is not a dangerous idea, rather an overdue, common-sense step Nevada can take to help protect its citizens and increase access to the mental health services necessary to respond to the challenges facing our schools, our families and our communities.

BETH POWELL (Director Public Policy and Professional Issues, American Mental Health Counselors Association):

The American Mental Health Counselors Association strongly supports S.B. 543, and we urge you to adopt the bill during this Session.

LOUISE SUTHERLAND (National Board for Certified Counselors):

The National Board for Certified Counselors strongly supports this bill. I have a pamphlet to hand out ([Exhibit C](#)).

PATRICIA A. MARKOS (Chair, Department of Counselor Education, University of Nevada, Las Vegas):

I am here today as a professional counselor and as a private citizen in support of S.B. 543. I want to be clear I am not representing my position at the University of Nevada, Las Vegas (UNLV) or the Nevada System of Higher Education. I would like to talk about the mental health statistics for Nevada ([Exhibit D](#)). In



the handout there are staggering statistics. The suicide rate in our State is of concern, but even more are the rates in the rural areas. The national average of suicide is 10 suicides per 100,000 people. In rural Nevada, those statistics are 25.63 for every 100,000 people. Four of Nevada's seventeen counties do not have a mental health clinic. Nevada is ranked second in homelessness. Anywhere from 22 to 50 percent of the people who are homeless on the street had a serious mental health issue. In my handout, you can see the educational requirements for community mental health counseling and for marriage and family counseling as they currently exist at the UNLV. I wanted you to see the community mental health counseling program is not training marriage and family therapists. We are training mental health professionals. Our program is 60 credits. We decided to develop this program because of the needs in Nevada. This program has a 900-hour internship. There are courses in addictions and mental health counseling to help meet the needs of the citizens of Nevada. This legislation will not change the scope of practice for people who are marriage and family therapists. We want licensure for professional counselors in the area of mental health.

Section 15 addresses the practice of professional counseling. It means the provision of treatment, assessment and counseling or equivalent activities to a person, couples, families or groups to achieve mental, emotional, physical, social, moral, educational, spiritual or career development and adjustment through the lifespan. "We want to go on record as saying our LPCs would not be training MFTs." We are training professional counselors.

SENATOR CARLTON:

How long has the community mental health counseling program been in existence?

Ms. MARKOS:

This program was approved in October 2006. We formally started admitting students in January. Community counseling has been around at the UNLV since 1974.

SENATOR CARLTON:

What types of positions do your graduates go into?

Ms. MARKOS:

Once our students graduate they will be able to go into State positions that are available or into the 48 states and become LPCs. Upon graduation, many go into agency work at the county or for the State under the supervision of a licensed person. They are not able to do private practice or meet any of the needs of people who are in rural areas.

SENATOR CARLTON:

Was there a program before October 2006?

Ms. MARKOS:

We had a community counseling program for 48 credits. It did not have a strong mental health emphasis, but an addiction emphasis.

We went to a 60-credit mental health program because we could see what the needs were in the community. Our courses no longer overlap.

You will not have to start the program over again to receive a master's degree. The UNLV, Department of Marriage and Family Therapy has a certificate program consisting of 24 credits that students can take to reach the requirements that are needed in Nevada to become a marriage and family therapist.

SENATOR CARLTON:

Do any of these 60 credits apply towards the 24 credits?

Ms. MARKOS:

There may be some overlap in an ethics class and an addiction class.

CHAIR TOWNSEND:

Our university offers degrees in business administration. A student then chooses a particular field of interest; some are called majors, areas of concentration or a number of other things. Has there been a discussion to have a degree of Licensed Professional Counselor and let students choose their area of concentration?

MS. MARKOS:

The marriage and family therapy program is split and their accreditation is different. The program at the UNLV is going with an accrediting agency that is part of the marriage and family therapy.

CHAIR TOWNSEND:

You referenced section 15, the practice of professional counseling. One of the components is spiritual or career development and adjustment through lifespan. Are we going to license every clergy or person of the cloth?

MS. MARKOS:

That is not the intent. This is to license professional counselors who meet the educational requirements for professional counseling.

SENATOR HECK:

There is a section that specifically exempts members of the clergy from having to be licensed.

ERIK SCHOEN (Professional Counselor):

Senate Bill 543 creates a compound board. This is fantastic for a number of reasons, but I will mention two. First, it mirrors the national recognition of the importance of substance abuse and mental health working closely together. This has already been recognized at the State level.

Secondly, in the treatment of mental health afflictions, the gold standard is to use what is called a multidiscipline team approach. A social worker will work with a psychologist, psychiatrist, marriage and family therapist and with a professional counselor. This joint board would encapsulate and utilize this long and broadly recognized gold standard. A compound board would help and enhance each of the discipline's ability to protect the public by providing a forum for collaboration and collegiality, sharing of resources and sharing of vast practices. As an example, instead of the current board of 5 members, marriage and family therapists under the compound board would have a total of 11 members to share their important work. Nevada is losing the war when it comes to mental health treatment. Nevada is at or near the bottom of just about any mental health index. There are approximately 250 professional counselors in Nevada who with the passage of S.B. 543 would be able to begin helping to provide these much needed services to Nevada immediately.

If what is currently in place was working, we would not be before you today. Nevada would not be at, or near, the bottom of nearly every mental health index.

Marriage and family therapists cannot do this alone; neither can social workers, psychologists, alcohol and drug counselors or psychiatrists. The problem is too large to not have all capable hands helping with this work. This bill serves the largest public good and safety by ensuring that as many Nevadans as possible will have access to quality mental health care by having all available disciplines ready to help. We further jeopardize public safety if we maintain the status quo because of untreated people unnecessarily utilizing valuable emergency room beds and filling the cells of an overwhelmed law enforcement system.

SHAUN LARRABEE (Licensed Professional Counselor):

I am a LPC from the state of Nebraska, one of the states that has a composite board. I also am a licensed drug and alcohol counselor in Nevada and a supervisor of interns. I currently reside in Fallon and am the token rural person here. We know about Nevada's high suicide rate and lack of mental health services. A month ago a patient of mine killed herself. She was bipolar and a methamphetamine addict. She had recently been released from an inpatient psychiatric facility with the understanding she would receive immediate mental health follow-up care. She came to me and together we attempted to get her into her local rural mental health clinic. They were unable to get her in until the first week of April. That was five months a seriously, mentally ill woman was unable to receive services. We do not know if the patient might not have killed herself had there been more resources in place, but will never know. We need more mental health providers.

TERRY LYNN TUTTLE (Licensed Professional Counselor):

I ask for your support and passage of S.B. 543. I have provided a handout ([Exhibit E](#)) of my experience trying to work professionally in Nevada. I am 1 of the 250 qualified LPCs that now live in this State. I moved to Nevada last year from the state of Virginia. I want to talk about my experience trying to work professionally in Nevada with my skills. I hold a Ph.D. in counselor education and supervision. I also hold a post-master's certificate in marriage and family therapy. In the course of getting my Ph.D., I wanted to take a couple of family systems classes. Just like Nevada there is a problem in Virginia as well. I had to be enrolled in a degree program in marriage and family therapy and counseling in order to take the courses. I moved here with ten years' experience working with

people with serious mental illness. I worked six years for a private agency providing services. I am unable to practice independently or to qualify within the regulations for a State job. I have over 500 hours of supervision but only 120 hours are from marriage and family therapy. That eliminates me from licensure in marriage and family therapy despite all of my education and experience in the field. I have a job interview in Douglas County. If I am deemed to be the most qualified candidate, a waiver will have to be issued because I do not qualify for marriage and family therapy certification. By bringing LPCs into the fold and allowing them to provide services, you can actually diminish some of the costs to the State or make it budget neutral.

JENNI JOHNSON:

I am representing myself as a private citizen in support of this bill. I work for the Division of Mental Health and Developmental Services (MHDS), Rural Clinics, Carson Mental Health Center, and in no way does my testimony represent MHDS or Rural Clinics. I am here on annual leave and speaking as a private citizen. I see personally every day the lack of professionals in the rural areas. My specialty is children and adolescents. I was a therapist for seven years before moving to Nevada five years ago. I work as a service coordinator for children and youth who are ending up on West Hills, Willow Springs and placements in Las Vegas. They have not even had outpatient mental health services or psychiatric services because of the dire shortage of professionals. I am here, willing and qualified to do the work. You will have other professional counselors willing to come to Nevada to fill this need.

FRANK PARENTI (Executive Director, Nevada Alliance for Addiction Disorders, Advocacy, Prevention and Treatment):

I am representing approximately 25 agencies throughout the State. We want to support this bill with one caveat; we could not come to a consensus on merging of the boards. That was our only issue. We need as many people as possible to provide mental health services in the State.

LARRY ASHLEY (Department of Counseling, University of Nevada, Las Vegas):

I represent the approximately 300 LPCs in the State that cannot practice in Nevada. I have trained psychiatrists and psychologists to treat co-occurring disorders in Nevada, but I cannot practice as a licensed mental health professional. I have about seven licenses and certificates between here and Michigan and I still cannot see clients independently, although I am trained in psychiatry to do so. I strongly encourage you support this bill.

WENDY HOSKINS (University of Nevada Las Vegas):

I have lived in many states that I have been able to work as a counselor. I am in support of this bill. We have students taking their comprehensive exam but unfortunately will have to leave the State if they want to pursue an LPC profession. We have many qualified people ready to go out and work with those people who are not able to get services. Please allow us to serve our State.

SENATOR CARLTON:

I want to get a few things on the record with my coconspirator on the subcommittee on board. Did you see this as a reciprocal type of agreement? If they are coming from one of the other states, would they be able to present that to this new subset and just be able to switch over, or is there going to be a credentialing process? How did you envision it?

SENATOR HECK:

There are provisions within the bill that if they are a LPC from a state that recognizes the LPC, there would be the ability for them to be licensed here based on the academics being the same and passing the background check. They would go through the entire process but would not have to repeat their training curriculum.

SENATOR CARLTON:

Would it be in the regulatory area that we would establish the reciprocity type of agreement?

SENATOR HECK:

There is a provision in the bill that says if they come from another state with similar academic requirements and pass the application process, they could be licensed as a LPC here.

HELEN A. FOLEY (Nevada Association of Marriage and Family Therapists):

During the last hour we have heard about the LPCs. As marriage and family therapists, we have great concerns about different issues specifically credentialing educational standards. If a person has passed the National Counselor Examination for Licensure and Certification, then they become a behavioral health professional. We would want to make sure anyone who is licensed as a mental health professional have that type of credential. We do not know why we need a super board to license professional counselors. We believe

the issue of professional counselors, those dealing specifically with mental health, should be considered on their own. We need to take a look at their educational and internship standards. Why are we putting other professions into a super board, excluding social workers? The argument is that some social workers do not practice mental health. Licensed alcohol and drug abuse counselors are not practicing mental health and some just have college degrees. For all of these organizations to be lumped together does not make sense to us. It changes the scope of the curriculum for MFTs and reduces the numbers of those eligible to practice in our State. We would like to look at LPCs and leave everyone else out of it. I have a fact sheet ([Exhibit F](#)) from the American Association for Marriage and Family Therapy on the federal government's recognition of marriage and family counselors.

GERALD WEEKS (Chair, Department of Marriage and Family Therapy, University of Nevada, Las Vegas):

As chair, I have overseen the addiction counselors, professional counselors, and marriage and family therapists. I sent you a lengthy letter ([Exhibit G](#)) on April 4, 2007, detailing why I believe S.B. 543 should be rejected. The letter presented points regarding problems in the bill and provided the arguments and documentation as to why this should not be accepted. In order to protect the safety and welfare of the public and serve public interest, the licensing bill must facilitate the production of a number of providers who are well trained in accordance with their respective national accreditation bodies.

STEPHEN FIFE (Assistant Professor, Department of Marriage and Family Therapy, University of Nevada, Las Vegas):

I come before you as a marriage and family counselor and an educator of marriage and family counselors. I believe this bill is limited in its ability to meet the needs of the citizens. My concern is with the distinction between the training and scopes of practices. This may hinder or make it difficult for consumers of mental health services to determine the appropriateness of a potential provider. Marriage and family therapy is one of five recognized mental health disciplines of the federal government. The other core professional disciplines are psychiatrist, clinical psychologist, clinical social workers and psychiatric nurse specialist. I would direct your attention to section 11 and section 15 of the proposed bill in reference to the blurring of disciplines. I am concerned that the bill and testimony today fails to demonstrate how a super board will more effectively meet the mental health needs or address the mental health crisis. There are additional barriers to mental health services and this bill

leaves out those additional barriers. I urge you to reject the bill as it is presented.

CAPA CASALE (President, Nevada Association for Marriage and Family Therapy):  
It has become clear from the communications you had with the membership of my organization; we have serious concerns about the issue of the super board. We are concerned with the identity of our profession being changed by being placed under a behavioral health counseling board. I will not go into a lot of details of my written statement ([Exhibit H](#)) as these comments have already been noted. It is important to note, we are not here to oppose the licensures of LPCs in the State. We work with the LPCs every day in a positive fashion. Our concern is with this specific piece of legislation and with the language in terms of the scope of practice for LPCs.

SENATOR HARDY:

There seems to be a good case study that this concept works. I do not think this will limit the professionals that would be available. No one has brought to my attention that these do not work. I have been here for 18 years and I recognize a turf battle when I see one. I really get the sense that is occurring here. I am going to need some compelling information to tell me that 48 states are wrong and 30 states are wrong by the way they are doing this.

K. NEENA LAXALT (Board of Examiners for Marriage and Family Therapists):

It is not the end result that we are looking at, but how to get there. Assembly Bill 424 will be heard this afternoon. The Board of Examiners for Marriage and Family Therapists is neutral on that bill. It is a more direct system and process. There is no disagreement for the end result.

SENATOR HARDY:

For some reason it appears to be the method that has been chosen by a lot of other states, with success. No one has indicated to me there has been a massive problem or concerns that are being articulated.

Ms. LAXALT:

Assembly Bill 424 actually takes the LPCs and put them with the Board of Examiners for Marriage and Family Therapists. There is a joining of boards within that structure. We are not opposed. There are concerns from the association and maybe some of the academic people regarding the development of criteria, but it is not an opposition to the bill or the structure.



DR. DON HUGGINS:

I have a doctorate in marriage and family therapy, dual licensure in marriage and family therapy, and alcohol and drug abuse counseling, and a supervisor in both areas. I am also an educator in marriage and family therapy in a program at the University of Phoenix. I have taught at the University of Nevada, Reno in alcohol and drug abuse along with school counseling. I believe we should not include couples counseling or family counseling within the scope of practice of the LPC. The training and practice of marriage and family therapy is unique among the mental health professionals. It is vastly different from the training for LPCs in most of the states. Marriage and family therapists are trained to perform systemic assessments and interventions. It is not an individual approach. We are also trained to do individual counseling. We believe the individual's mental health and emotional problems must be treated within the context of prior relationship if gains are to be meaningful and productive for the patient. When relationship patterns are altered, the symptoms are improved. This kind of training is not offered to LPCs in Nevada. Educators in community counseling emphasize the individual psychological approach. Our accreditation emphasizes and requires course work in seven to nine classes which are focused on systemic interventions and assessments. We also have courses in marriage and family and couples counseling. I am suggesting that S.B. 543 goes too far by defining professional counseling as a provision of counseling to couples, families and groups. They are not trained for that and it blurs the line between professions, opens couples and family counseling practitioners who have not been specifically trained. We need to protect our citizens by ensuring that couples counseling and family therapy are performed by licensed MFTs who are specifically trained in these areas.

**SENATE BILL 543**: Establishes the practice of behavioral health counseling.  
(BDR 54-308)

RICHARD VANDE VOORT, M.A. (President, Board of Examiners for Marriage and Family Therapists):

I encourage you to reject S.B. 543. This bill clouds the distinctions between professions. There are clear and separate curriculums, codes of ethics and scopes. The public has the right to discern the distinctions and S.B. 543 makes it almost impossible. The bill is attempting to combine apples and oranges. One size fits all ways of thinking is a very serious threat to the standards that we hold. The average amount of time to prepare for just one of our quarterly

meetings is over 100 hours for my staff and me. I have prepared a handout ([Exhibit I](#)) on the breakdown of the hours.

KATHERINE HERTLEIN (University of Nevada, Las Vegas):

My statements represent my feelings as a professional in the field and a private citizen and not those of my position at the University of Nevada, Las Vegas. This bill creates an unethical practice standard for licensed professional counselors. In section 36, the bill states that an applicant for the license of an LPC should have 1,200 hours of counseling directly with a person, couples, families or groups. Section 11 defines the practice of professional counseling to include a variety of activities that Dr. Markos read earlier. The term in section 15 also includes "without limitation" within that section, without limitation counseling interventions to prevent, diagnose and treat mental, emotional or behavioral disorders and associated distresses. I would like to draw your attention to the inclusion of couples, families and without limitation. With this bill, the LPCs have the license to treat a variety of areas and situations out of the scope of their training. The way this bill was written, the LPC would be able to practice like a marriage and family therapist. This violates several organizations' ethical codes, including the American Counseling Association, the American Association for Marriage and Family Therapy and the accrediting bodies. If a professional counselor completed a program like the one at the UNLV, which does not require courses in marriage and family therapy as part of the core curriculum and practices marriage and family therapy, they would be in violation of their own ethical code. It is not in the public's best interest to have a group of people practicing marriage and family therapy or any sort of practice where they are not trained to do so.

GARY WATERS:

I have sat on 3 regulatory boards over the past 20 years. I am also a licensee in four of the areas of specialty that are being discussed. I have 35 years of mental health experience, training and practice in the State. My concern is consolidating regulatory boards. Unless you consolidate all the entities, then you are not consolidating at all. Under this bill, you are adding a new entity to the mix and leaving out several very important mental health disciplines. There are limits for the effectiveness of the concept of consolidation. The concept will not increase the number of professional mental health providers by changing the labels or identities.

While the titles of many existing mental health disciplines are specific and defined in regulation and in law, the term, counselor is a shared definition. Allowing one select group to define themselves will confuse the public as well as probably disrupt the regulatory structures of your current existing mental health disciplines. I have provided the Committee additional points stated in my letter ([Exhibit J](#)).

SHELLEY SENDAK:

I am concerned about meeting the health care needs of those in our State. Forty-eight of fifty states currently license professional counselors and the majority uses a type of combined board for licensure. Sixteen of these combined boards defer to the training and educational requirements, codes of ethics and scopes of practice delineated by each profession's national association. With this bill, Nevada has the potential to join a long list of states that recognize the services of professional counselors. The combined oversight board proposed in this legislation has the potential to extend safeguards to consumers who access a variety of mental, emotional and behavioral health care professionals. You have taken the first step in protecting consumers with the goal of licensing a variety of professionals. I would like you to acknowledge and ensure those who would serve have the right credentials. We need to be sure each of these specialized professions has its own requirements for training and practice and the requirements meet or exceed the requirements established by the national boards. We need to demand that each profession hold oversight of its own licenses through separate credentialing committees and standards established by each profession's national association.

AMANDA HUGHES (Student, University of Nevada, Las Vegas):

As a student, I would urge you to reject this bill. I am pursuing a degree in this field specifically because of our unique relational perspective that marriage and family therapists practice. As a student taking practicum, I have a client caseload with over half of my clients being couples and families. These couples and families seek counseling specifically from marriage and family therapists because we are specially training from a relational perspective. There is little or no overlap between the community mental health program and the marriage and family therapy program at the UNLV. Combining these professions under one board would dilute these disciplines rather than strengthening them. As a student receiving training in marriage and family therapy, I am not trained in treating substance abuse or problem gambling. Students in the other fields do not receive training and treatment of marriage and family therapy problems.

People seek treatment from professionals who can meet their specific needs. Combining these professions under one board will make it difficult for the public to find the counselor who can best suit their needs.

RENA M. NORA, M.D. (Board of Examiners for Alcohol, Drug and Gambling Counselors):

I am speaking as an individual citizen and a practicing psychiatrist of over 25 years in mental health and addiction. I support the concept of having LPCs, but I am concerned about the merging and abolishing the Board of Examiners for Alcohol, Drug and Gambling Counselors. We have concerns with the confusion this might create and the problems with curriculum. The treatment and the cure should not be more painful than the disease.

KEVIN QUINT (Board of Examiners for Alcohol, Drug and Gambling Counselors):

I have written testimony ([Exhibit K](#)) to present today. We do support the development of LPCs because it broadens the pool of those that can treat mental health conditions. Our primary concern with this bill is the creation of the Board of Examiners for Behavioral Health Counseling.

MARGO HILL (Licensed Marriage and Family Therapist):

I had as a client a LPC who would be an asset to Nevada. She is well trained within her scope of practice. She would be the first to admit she has had no training in relational issues, working with families or couples. Her own personal work has benefited her from having the focus. She is looking at adding that to her expertise. She would be the first to tell you it needs to be removed from the scope of practice from LPCs.

JUDY K. PHOENIX, Ph.D. (Nevada State Psychological Association):

We have three main concerns as the bill is written. The scope of practice and education is our first concern. We would like to make sure the scope does not include the practice of psychology or medicine. In section 15, the language includes assessment and counseling or equivalent activities. We would like that to be clarified. The term "includes without limitation" needs to be taken out. None of us work without limitations in the scope of our practice. We are asking the treatment of mental, emotional behavioral disorders and associated distress be clarified, as we do not know what that means. The scope needs to be more specific.

Another concern is in the language with which trainees are called provisional licensures. That is a confusing term. We call them trainee assistants or interns. When you say someone has a provisional license you are implying they have the ability to practice independently in that field. That would be confusing to people.

Lastly, we want to make sure the grandfathering is limited to people who meet the minimum qualifications of this bill and no one be included in this as a licensed professional counselor who does not meet those qualifications.

CHAIR TOWNSEND:

Mark Nichols, Executive Director, National Association of Social Workers, provided written testimony ([Exhibit L](#)) to be entered into the record showing neutrality on this bill.

SENATOR HECK:

This bill is submitted on behalf of the Legislative Committee on Health Care. The recommendation that came out of the subcommittee on substance abuse was to proceed with the ability to recognize the LPC. The subcommittee stayed silent on how that would be done, through a joint board or a separate board.

I want to answer some of the concerns that were brought up regarding education. Currently, the requirements are listed in regulation in the MFT chapter and not in statute. This bill attempts to provide minimums that are in statute in a broad base of areas that was specifically left broad so that each entity would be able to take the classes they need. If you took what is listed in statute and laid it across what was provided by the MFT program, you see there is a crosswalk for all of those classes.

In other states the primary titles are either licensed professional counselor or licensed mental health counselor. When we started the bill we used licensed mental health counselor and those that have testified about the confusion using the term professional counselor used the same argument against mental health counselor. If someone would liked to offer an alternative term rather than just say the two that are commonly used across the country are inadequate, I would be happy to entertain such a recommendation.

It is interesting that everyone is somewhat reluctant to join the boards but yet it appears there is not as much opposition to the Assembly bill as long as the

Senate Committee on Commerce and Labor  
April 9, 2007  
Page 22

licensed professional counselors are subservient to an existing board. The scope issues including the terms couples, families, and group counseling should have been brought forward during the nine months I worked on this bill. The drafts were going back and forth along all the interested parties because that could have been taken care of before the bill was done, and I will address that issue.

I think the important thing that has been stated by everybody is that the licensed professional counselor, licensed mental health counselor, or whatever the term may turn out to be, are recognized in the State to be able to provide the services that are needed. I will await direction from the Committee on how they want to proceed in regard to board makeup, and I would be happy to work on that and have a mock-up reflecting requested changes available by Friday when we need to pass this bill out of Committee.

CHAIR TOWNSEND:

We will close the hearing on S.B. 543 and open the work session on S.B. 546.

**SENATE BILL 546**: Revises provisions relating to mortgage lending.  
(BDR 54-1412)

SCOTT E. BICE (Commissioner, Division of Mortgage Lending, Department of Business and Industry):

I would like to go over our proposed amendment changes ([Exhibit M](#)). You can follow along with the handout.

SENATOR CARLTON:

Who is left in the bill?

MR. BICE:

The mortgage brokers in the State do about 80 percent of the origination business. Mortgage brokers and their agents are still in this bill. Locations of mortgage bankers and branch offices are still in the bill. The individuals that were conducting mortgage transaction business are out of this bill. This does not cover national banks that are exempt from a federal preemption.

CHAIR TOWNSEND:

Mr. Bice, have you seen Mr. Uffelman's proposed amendment ([Exhibit N](#))?

MR. BICE:

One of the discussions I had with Mr. Uffelman about his proposed amendment was relating to the affiliates, subsidiaries or holding companies. He deleted language regarding the other entity that should be responsible. We want to make sure those conducting mortgage business have appropriate regulation by some entity. We wanted to address that whoever was going to be exempt, would be under the purview of another regulatory agency. Deleting that section would not be good in our regulatory environment.

CHAIR TOWNSEND:

You are proposing to delete mortgage agent. Your language says you are deleting the sections to remove the licensing requirement for mortgage agents. Are you saying you do not want to have a licensing requirement for agents?

MR. BICE:

That is correct. The reason we placed the language was to get down to the individual. We would suggest if they have been denied a license by us and work for a broker, they probably should not be able to go to work for other entities. The intent was to remove the individual licensure.

CHAIR TOWNSEND:

It is not fair to Mr. Bice to say there are 32 amendments, just react to them. We have not seen the amendments.

MARK BREWER (Certified Mortgage Planning Specialist):

I am not here to condemn the bill in whole, only to strengthen it in specific areas. I would like the commissioner to be able to effectively use his powers provided through this bill and establish statute as well. I have my proposed amendments ([Exhibit O](#), original is on file at the Research Library) available for you to see.

CHAIR TOWNSEND:

Since the Committee has not seen the proposed amendments of Mr. Bice, I am going to move on and let Mr. Bice, Mr. Brewer and Mr. Uffelman go to my office so they can go over these amendments.

I do have a question for Mr. Bice. Do you have access to other regulatory agencies' or law enforcement agencies' information on companies that are licensed? That might help you decide if someone is worth keeping an eye on.

Senate Committee on Commerce and Labor  
April 9, 2007  
Page 24

MR. BICE:

In the Division of Real Estate, there are confidentiality clauses in their statutes that should be coming through this Session to alleviate the situation. It will open up the discussion so we can better focus on the joint licensees with whom we have issues. I am sure you will want to take testimony from those in the title industry. The number one violation of the mortgage business is unlicensed activity. The second is inadequate supervision over people.

CHAIR TOWNSEND:

I will close the hearing on S.B. 546. I will open the hearing on S.B. 113.

**SENATE BILL 113**: Requires certain policies of health insurance and health care plans to provide coverage for annual screenings for prostate cancer in certain circumstances. (BDR 57-333)

SENATOR CARLTON:

This proposed amendment ([Exhibit P](#)) will add prostate cancer to the existing language of colorectal screening, if you treat the disease, screen for the disease.

CHAIR TOWNSEND:

In the proposed amendment, we are going to remove sections 2, 4, 5, 6, 9 and 10 and replace them with the XX section.

JACK KIM (Nevada Association of Health Plans):

The reason the guidelines were placed for the colorectal cancer screening is so they are clear. They wanted scientific evidence to support those guidelines. We will not support a mandate but will be neutral on the bill.

SENATOR CARLTON MOVED TO AMEND AND DO PASS AS AMENDED  
S.B. 113.

SENATOR SCHNEIDER SECONDED THE MOTION.

SENATOR HARDY:

I understand we want to do some good on this bill. I have become convinced that insurance mandates are a large reason why insurance costs are so expensive. The insurance cost is the reason health care is so expensive. I have made a hard decision that I will not get into the emotional arguments. It is a



Senate Committee on Commerce and Labor  
April 9, 2007  
Page 25

difficult decision for me to make, but I have decided on a philosophical basis I am going to vote against all mandates.

SENATOR HECK:

I echo the comments of my colleague. It is even harder for me being a practicing physician, but the issue is we are mandating something in law that is already taken care of. As stated in previous testimony, if I order the test it is paid for regardless of it being in statute. Putting a mandate on the books is something I cannot support.

THE MOTION CARRIED. (SENATOR HARDY AND SENATOR HECK VOTED NO.)

\* \* \* \* \*

CHAIR TOWNSEND:

I will open the hearing on S.B. 181.

**SENATE BILL 181**: Revises provisions governing certain construction contracts.  
(BDR 54-270)

SENATOR CARLTON:

This bill is not going to work and we have tried to fix it. I am requesting as the sole sponsor of this bill that it be indefinitely postponed.

SENATOR CARLTON MOVED TO INDEFINITELY POSTPONE S.B. 181.

SENATOR HARDY SECONDED THE MOTION.

SENATOR HARDY:

This bill became more complicated as we realized the ramifications. We will continue to work on it.

THE MOTION CARRIED UNANIMOUSLY.

\* \* \* \* \*

CHAIR TOWNSEND:

I will open the hearing on S.B. 285.

Senate Committee on Commerce and Labor  
April 9, 2007  
Page 26

**SENATE BILL 285**: Revises provisions concerning a restricted license to practice medicine as a psychiatrist in a mental health center of the Division of Mental Health and Developmental Services of the Department of Health and Human Services. (BDR 54-65)

SENATOR HECK:

The reason for the change was the stigma associated with having what is now called a restrictive license. The bill wants to change the wording to a limited license. It was felt the Division of Mental Health and Developmental Services was having a hard time recruiting psychiatrists to practice within the State system with the term restrictive license. It was felt this would have a negative connotation. The bill was to change the wording to limited license, instead of restricted license.

SENATOR HARDY:

My notes indicate the sponsor wanted to remove the limitation on the number of times a limited license could be renewed. They also wanted to make it available to non-State-run hospitals. Keith Lee indicated he was concerned about the distinction between limited and restrictive license and wanted to be involved in the discussions.

CHAIR TOWNSEND:

The Division will have to come back and help us on this bill.

I will close the hearing on S.B. 285 and open the hearing on S.B. 310

**SENATE BILL 310**: Makes various changes relating to professions and occupations. (BDR 54-131)

SENATOR CARLTON:

We had a change on the fee schedule ([Exhibit Q](#)) in my proposed amendment. I also had the advisory committee change which I proposed to be under the Legislative Commission ([Exhibit R](#)).

SENATOR HECK:

I spoke to Senator Washington and Ms. Lyons. The amendment to that bill has not been drafted yet. I was unable to bring it to this Committee and put it into this bill. It accomplishes the same thing, but does it for the Legislative Committee on Health Care during the interim so there is no additional fiscal

Senate Committee on Commerce and Labor  
April 9, 2007  
Page 27

note. I think it is important to have the same language in this bill because the other bill does have a fiscal note.

SENATOR CARLTON:

We could process this bill as is, and if we need to, present a Committee floor amendment on S.B. 310.

SENATOR HARDY:

Could we process the bill with the change Senator Heck articulated, then deal with the amendment?

SENATOR CARLTON:

My version was written before Senator Heck and Senator Washington reworked the amendment. If he is comfortable with the rewrite, then I will go with that language.

SENATOR HARDY:

I would suggest we go from \$80 to \$150 on the pay issue and deal with the creation of the board issue as Senator Heck has outlined and is being worked on in S.B. 221 so those two bills match.

**SENATE BILL 221**: Revises provisions relating to the development and implementation of health care policy in this State. (BDR 40-307)

SENATOR CARLTON:

There was a proposed amendment on the day of the hearing, eliminating the social workers from the bill. It would be the changes of no social worker, the pay issue and the advisory committee issue.

CHAIR TOWNSEND:

We would have three amendments under the motion by Senator Hardy which would be to include the language from S.B. 221 regarding the oversight. This would also include the pay issue and the removal of section 15 regarding the social workers.

SENATOR HARDY MOVED TO AMEND AND DO PASS S.B. 310 WITH THE FIRST AMENDMENT FROM SENATOR CARLTON.

SENATOR CARLTON SECONDED THE MOTION.

Senate Committee on Commerce and Labor  
April 9, 2007  
Page 28

SENATOR HARDY:

I disclosed during the hearing but want to disclose again that my wife and daughter are licensed by the Cosmetology Board as cosmetologists. My wife is also licensed as a salon owner.

SENATOR CARLTON:

I think we need on the record, the changing of the salary issue. Does that change this bill to a two-thirds majority vote or is it because boards are self-sufficient allowing them to pay more, which does not make it two-thirds? That was my impression, but I would like to get that on the record.

WIL KEANE:

"For the record, it does not require a two-thirds vote to increase the salary that a member of a board may receive."

SENATOR CARLTON:

They are.

CHAIR TOWNSEND:

Maybe self-funded would be a better word. Sometimes they do not end up being self-sufficient because they have cases against them.

THE MOTION CARRIED UNANIMOUSLY.

\* \* \* \* \*

CHAIR TOWNSEND:

I will close the work session on S.B. 310 and open the work session on S.B. 409.

**SENATE BILL 409**: Requires policies of health insurance and health plans to provide coverage for a vaccine to protect against cervical cancer. (BDR 57-1077)

SENATOR CARLTON MOVED TO DO PASS S.B. 409.

SENATOR SCHNEIDER SECONDED THE MOTION.

Senate Committee on Commerce and Labor  
April 9, 2007  
Page 29

SENATOR HECK:

In staying consistent with the previous mandate explanation, I have to put the same on the record for this bill. I think it is a great thing that researchers have been able to develop a vaccine for a type of cancer, but mandating it to insurance companies poses me some concern.

THE MOTION CARRIED. (SENATOR HECK AND SENATOR HARDY VOTED NO.)

CHAIR TOWNSEND:

We will close the work session on S.B. 409 and open the work session on S.B. 410.

**SENATE BILL 410**: Provides for the licensure and regulation of computer forensics examiners. (BDR 54-886)

SENATOR CARLTON:

The proposed amendment has been turned into mock-up language ([Exhibit S](#)). I believe we have addressed all concerns.

SENATOR HARDY:

My notes indicate in section 4 we are removing exempting special agents, investigators, examiners or specialized employee they wanted individuals in that category that work in law enforcement. I do not want there to be confusion.

SENATOR CARLTON:

By taking out detective or officer, we do not limit it to just law enforcement.

SENATOR CARLTON MOVED TO AMEND AND DO PASS AS AMENDED S.B. 410.

SENATOR HARDY SECONDED THE MOTION.

CHAIR TOWNSEND:

"For the record, my firm does own a company that does this, although it is based in Arizona. I believe they do work here."

Senate Committee on Commerce and Labor  
April 9, 2007  
Page 30

THE MOTION CARRIED UNANIMOUSLY.

\* \* \* \* \*

CHAIR TOWNSEND:

I will close the work session on S.B. 410 and open the work session on S.B. 476.

**SENATE BILL 476**: Makes various changes concerning business practices.  
(BDR 54-1389)

SCOTT YOUNG (Committee Policy Analyst):

You are receiving the mock-up prepared by the Legal Division ([Exhibit T](#), original is on file at the Research Library).

SENATOR TOWNSEND:

The Committee can review this and we will take it up tomorrow due to the late hour.

SCOTT YOUNG:

I am handing out a second piece, a proposed amendment ([Exhibit U](#)) that you could substitute for section 1, if you wanted to follow the more extended regulatory scheme that Maine has adopted.

CHAIR TOWNSEND:

I will close the work session on S.B. 476 and open the work session on S.B. 546.

**SENATE BILL 546**: Revises provisions relating to mortgage lending.  
(BDR 54-1412)

ERIN SUMMERS (Division of Insurance, Department of Business and Industry):

I am an actuary with the Division of Insurance. We support the Division of Mortgage Lending's efforts to curb unlicensed activity. As written, we have objections to section 72, subsection 2, paragraph (b) which requires a title agent or escrow officer to independently verify a mortgage broker or mortgage banker's license in a manner to be prescribed by the Division of Mortgage Lending. Paragraph (c) requires the title agent or escrow officer to report the unlicensed person in a manner prescribed by the Division of Mortgage Lending.

The Division of Insurance believes it is inappropriate for the Division of Mortgage Lending to have jurisdiction over the Division of Insurance licensees. We spoke to Mr. Bice and he did agree to take out the phrase, "in a manner to be prescribed by the Division." With those amendments, we are neutral towards the bill. We do have questions on the difficulty of the process. Where it says they have to report the person if they are unlicensed and not exempt from licensing, we do not know if the title agent or escrow officers know if a person is exempt from licensing. Those are our only concerns.

SYLVIA SMITH (Nevada Land Title Association):

We are asking that section 72 be deleted in its entirety. See our proposal ([Exhibit V](#)). We should not be put in a position to be the "police" for the Division of Mortgage Lending. We are a neutral third party in a transaction. Generally, the information is not provided to us. It can change several times for the lender until the very end. It would put an undue hardship on the industry to try and police and verify. We support the purpose of the bill in trying to lessen mortgage fraud.

Senate Committee on Commerce and Labor  
April 9, 2007  
Page 32

CHAIR TOWNSEND:

There being no further business before the Senate Commerce and Labor, we are officially adjourned at 11:02 a.m.

RESPECTFULLY SUBMITTED:

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Gloria Gaillard-Powell,  
Committee Secretary

APPROVED BY:

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Senator Randolph J. Townsend, Chair

DATE: \_\_\_\_\_